

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Indiana Democratic Congressional Victory Committee

ADDRESS (number and street)

One North Capitol Suite 200

☐Check if different
than previously
reported. (ACC)

Indianapolis

IN

46204

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00108613

3. IS THIS
REPORT☐NEW
(N)**OR**☒AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☒

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

11

07

2006

in the
State of

IN

(d) 30-Day
Post -Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

10

01

2006

through

10

18

2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Mrs Linda M Buzinec

Signature of Treasurer

Electronically Filed by Mrs Linda M Buzinec

Date

02

24

2009

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Indiana Democratic Congressional Victory Committee

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
1	0	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
1	0	1	8	2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2006		286404.72
(b) Cash on Hand at Beginning of Reporting Period	262669.07	
(c) Total Receipts (from Line 19)	656296.47	3142583.57
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	918965.54	3428988.29
7. Total Disbursements (from Line 31)	492327.25	3002350.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	426638.29	426638.29
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Indiana Democratic Congressional Victory Committee

Report Covering the Period:

From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	6

To:

M	M
1	0

D	D
1	8

Y	Y	Y	Y
2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	2025.00	166995.00
(i) Itemized (use Schedule A)	7980.00	33902.41
(ii) Unitemized	10005.00	200897.41
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	12825.26	72625.26
(c) Other Political Committees (such as PACs)	22830.26	273522.67
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5)		
12. Transfers From Affiliated/Other Party Committees	421912.89	728201.50
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	60363.78	580818.58
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	602.51	12113.76
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	150587.03	1547927.06
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	150587.03	1547927.06
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	656296.47	3142583.57
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	505709.44	1594656.51

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	9594.52	126523.09
(ii) Non-Federal Share.....	36093.65	494100.40
(b) Other Federal Operating Expenditures.....	39227.50	498229.01
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	84915.67	1118852.50
22. Transfers to Affiliated/Other Party Committees.....	0.00	143000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	25000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	35000.00	35000.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	118502.34	960393.55
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	253909.24	720103.95
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	253909.24	720103.95
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	492327.25	3002350.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	456233.60	2508249.60

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	22830.26	273522.67
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	22830.26	273522.67
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	48822.02	624752.10
37. Offsets to Operating Expenditures (from Line 15, page 3)	60363.78	580818.58
38. Net Operating Expenditures (subtract Line 37 from Line 36)	-11541.76	43933.52

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 84

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A.

Full Name (Last, First, Middle Initial)

Patricia M. Yount

Mailing Address 4585 W County Rd 100 S

City

North Vernon

State

IN

Zip Code

47265

FEC ID number of contributing
federal political committee.

C

Name of Employer
BLA Inc.

Occupation
Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 9 / 2 0 0 6

Transaction ID: C180855

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Michael B. O'Connor

Mailing Address 543 N Audubon Rd

City

Indianapolis

State

IN

Zip Code

46219-5836

FEC ID number of contributing
federal political committee.

C

Name of Employer
Bose Public Affairs

Occupation
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1120.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 9 / 2 0 0 6

Transaction ID: C131831

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

Marjorie L. Kienle

Mailing Address 536 E New York St

City

Indianapolis

State

IN

Zip Code

46202-3630

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 9 / 2 0 0 6

Transaction ID: C35144

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 84

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A.

Full Name (Last, First, Middle Initial)

Marjorie L. Kienle

Mailing Address 536 E New York St

City

Indianapolis

State

IN

Zip Code

46202-3630

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 9 / 2 0 0 6

Transaction ID: C35145

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Ann Burch

Mailing Address 870 Bellgrade Dr

City

Loogootee

State

IN

Zip Code

47553-4795

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 6

Transaction ID: C40240

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Marvin Lopata

Mailing Address 53309 Ba-i-er Ln

City

South Bend

State

IN

Zip Code

46635

FEC ID number of contributing
federal political committee.

C

Name of Employer
self

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 6

Transaction ID: C64220

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)

725.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 8 / 84

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A.

Full Name (Last, First, Middle Initial)

Alan P. Hogan

Mailing Address 661 E 9th St

City

Indianapolis

State

IN

Zip Code

46202-3462

FEC ID number of contributing
federal political committee.

C

Name of Employer
RQAW Corporation

Occupation

Sale/Marketing

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 9 / 2 0 0 6

Transaction ID: C115772

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Glenn R. Lawrence

Mailing Address 7859 N Chester Ave

City

Indianapolis

State

IN

Zip Code

46240-3408

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Attorney

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 9 / 2 0 0 6

Transaction ID: C137423

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Richard P. Fitzgerald

Mailing Address PO Box 505

City

Westfield

State

IN

Zip Code

46074-0505

FEC ID number of contributing
federal political committee.

C

Name of Employer
U.F.C.W.

Occupation

Union Rep.

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 6

Transaction ID: C40768

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

700.00

TOTAL This Period (last page this line number only)

2025.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A.

Full Name (Last, First, Middle Initial)

Hoyer for Congress Committee

Mailing Address 7905 Malcolm Rd
Ste 102

City State Zip Code
Clinton MD 20735-1701

FEC ID number of contributing
federal political committee.

C C00140715

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 0 6

Transaction ID: C81451

Amount of Each Receipt this Period

5000.00

Transfer

B.

Full Name (Last, First, Middle Initial)

I.B.E.W. - C.O.P.E. Federal

Mailing Address 900 7th St NW

City State Zip Code
Washington DC 20001-3720

FEC ID number of contributing
federal political committee.

C C00027342

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 0 6

Transaction ID: C144074

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Hoyer for Congress Committee

Mailing Address 7905 Malcolm Rd
Ste 102

City State Zip Code
Clinton MD 20735-1701

FEC ID number of contributing
federal political committee.

C C00140715

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 0 6

Transaction ID: C81453

Amount of Each Receipt this Period

5000.00

Transfer

SUBTOTAL of Receipts This Page (optional)

11000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 84

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A.

Full Name (Last, First, Middle Initial)

Southern Indiana Victory Fund

Mailing Address I N Capitol Ave, Ste 200

City

Indianapolis

State

IN

Zip Code

46204

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

8325.26

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 6

Transaction ID: C64197

Amount of Each Receipt this Period

1825.26

SUBTOTAL of Receipts This Page (optional)

1825.26

TOTAL This Period (last page this line number only)

12825.26

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 11 / 84

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A.

Full Name (Last, First, Middle Initial)

Democratic National Committee

Mailing Address 430 S Capitol St SE

City

Washington

State

DC

Zip Code

20003-4024

FEC ID number of contributing
federal political committee.

C C00010603

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

318851.50

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 0 6

Transaction ID: C55261

Amount of Each Receipt this Period

20000.00

B.

Full Name (Last, First, Middle Initial)

Democratic Congressional Campaign Committee

Mailing Address 430 S Capitol St SE

City

Washington

State

DC

Zip Code

20003-4024

FEC ID number of contributing
federal political committee.

C C00000935

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

387000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 6

Transaction ID: C39289

Amount of Each Receipt this Period

50000.00

C.

Full Name (Last, First, Middle Initial)

Democratic Congressional Campaign Committee

Mailing Address 430 S Capitol St SE

City

Washington

State

DC

Zip Code

20003-4024

FEC ID number of contributing
federal political committee.

C C00000935

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

387000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 6

Transaction ID: C39292

Amount of Each Receipt this Period

155000.00

SUBTOTAL of Receipts This Page (optional)

225000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 12 / 84

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☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A.

Full Name (Last, First, Middle Initial)

Democratic National Committee

Mailing Address 430 S Capitol St SE

City

Washington

State

DC

Zip Code

20003-4024

FEC ID number of contributing
federal political committee.

C C00010603

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

318851.50

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 0 6

Transaction ID: C55275

Amount of Each Receipt this Period

1050.76

B.

Full Name (Last, First, Middle Initial)

Democratic National Committee

Mailing Address 430 S Capitol St SE

City

Washington

State

DC

Zip Code

20003-4024

FEC ID number of contributing
federal political committee.

C C00010603

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

318851.50

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 6

Transaction ID: C55267

Amount of Each Receipt this Period

50000.00

C.

Full Name (Last, First, Middle Initial)

Democratic National Committee

Mailing Address 430 S Capitol St SE

City

Washington

State

DC

Zip Code

20003-4024

FEC ID number of contributing
federal political committee.

C C00010603

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

318851.50

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 0 6

Transaction ID: C55277

Amount of Each Receipt this Period

9862.13

SUBTOTAL of Receipts This Page (optional)

60912.89

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 84

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A.

Full Name (Last, First, Middle Initial)
Democratic Congressional Campaign Committee

Mailing Address 430 S Capitol St SE

City State Zip Code
Washington DC 20003-4024

FEC ID number of contributing
federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
387000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 0 6

Transaction ID: C39295

Amount of Each Receipt this Period

76000.00

B.

Full Name (Last, First, Middle Initial)
Democratic National Committee

Mailing Address 430 S Capitol St SE

City State Zip Code
Washington DC 20003-4024

FEC ID number of contributing
federal political committee. **C** C00010603

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
318851.50

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 1 / 2 0 0 6

Transaction ID: C55268

Amount of Each Receipt this Period

60000.00

SUBTOTAL of Receipts This Page (optional)

136000.00

TOTAL This Period (last page this line number only)

421912.89

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 84

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A.

Full Name (Last, First, Middle Initial)

Marion County Democratic Central Cmte

Mailing Address 603 E Washington St

City

Indianapolis

State

IN

Zip Code

46204-2695

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

151551.38

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 6

Transaction ID: C64995

Amount of Each Receipt this Period

5023.66

Offset for payroll on Line
29

B.

Full Name (Last, First, Middle Initial)

Tom Hayhurst for Congress Committee

Mailing Address PO Box 400058

City

Fort Wayne

State

IN

Zip Code

46804

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

39327.41

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 6

Transaction ID: C213823

Amount of Each Receipt this Period

7239.80

Offset for Payroll on Line
29

C.

Full Name (Last, First, Middle Initial)

Donnelly for Congress Committee

Mailing Address PO Box 1961

City

South Bend

State

IN

Zip Code

46634-1961

FEC ID number of contributing
federal political committee.

C

C00393652

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

60701.26

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 6

Transaction ID: C35304

Amount of Each Receipt this Period

12675.48

Offset for Payroll on Line
29

SUBTOTAL of Receipts This Page (optional)

24938.94

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 84

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A.

Full Name (Last, First, Middle Initial)

Julia Carson for Congress

Mailing Address 302 N East St

City

Indianapolis

State

IN

Zip Code

46202-3611

FEC ID number of contributing
federal political committee.

C C00311969

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

59662.39

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 6

Transaction ID: C215073

Amount of Each Receipt this Period

7031.04

Offset for Payroll on Line
29

B.

Full Name (Last, First, Middle Initial)

Hoosiers for Hill

Mailing Address PO Box 1071

City

Seymour

State

IN

Zip Code

47274-1071

FEC ID number of contributing
federal political committee.

C C00411835

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

80789.23

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 6

Transaction ID: C49486

Amount of Each Receipt this Period

13028.08

Offset for Payroll on Line
29

C.

Full Name (Last, First, Middle Initial)

Marion County Democratic Central Cmte

Mailing Address 603 E Washington St

City

Indianapolis

State

IN

Zip Code

46204-2695

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

151551.38

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 6

Transaction ID: C64993

Amount of Each Receipt this Period

11165.72

Offset for Payroll on Line
29

SUBTOTAL of Receipts This Page (optional)

31224.84

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 84

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A.

Full Name (Last, First, Middle Initial)

Hoosiers for Hill

Mailing Address PO Box 1071

City

Seymour

State

IN

Zip Code

47274-1071

FEC ID number of contributing
federal political committee.

C C00411835

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

80789.23

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 1 / 2 0 0 6

Transaction ID: C49488

Amount of Each Receipt this Period

4200.00

Offset for Payroll on Line
29

SUBTOTAL of Receipts This Page (optional)

4200.00

TOTAL This Period (last page this line number only)

60363.78

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 84

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A.

Full Name (Last, First, Middle Initial)

Old National Bank

Mailing Address PO Box 718

City

Evansville

State

IN

Zip Code

47705-0718

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Other (specify) ▼

Aggregate Year-to-Date ▼

5751.26

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 4 / 2 0 0 6

Transaction ID: C17751823

Amount of Each Receipt this Period

602.51

SUBTOTAL of Receipts This Page (optional)

602.51

TOTAL This Period (last page this line number only)

602.51

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 18 / 84

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A.

Full Name (Last, First, Middle Initial)

Anthem BCBS IN GROUP

Mailing Address PO Box 105113

City
Atlanta

State
GA

Zip Code
30348-5113

Purpose of Disbursement
health insurance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7330

Date of Disbursement

10 / 12 / 2006

Amount of Each Disbursement this Period

9010.19

B.

Full Name (Last, First, Middle Initial)

Internal Revenue Service

Mailing Address Cincinnati Commerce Ctr

City
Cincinnati

State
OH

Zip Code
45999

Purpose of Disbursement
payroll taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7331

Date of Disbursement

10 / 13 / 2006

Amount of Each Disbursement this Period

8904.77

C.

Full Name (Last, First, Middle Initial)

Indiana Dept of Workforce Development

Mailing Address 10 N Senate Ave

City
Indianapolis

State
IN

Zip Code
46204-2201

Purpose of Disbursement
payroll taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D242453

Date of Disbursement

10 / 13 / 2006

Amount of Each Disbursement this Period

179.03

SUBTOTAL of Disbursements This Page (optional)

18093.99

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A.

Full Name (Last, First, Middle Initial)

Verizon North

Mailing Address PO Box 920041

City
Dallas

State
TX

Zip Code
75392-0041

Purpose of Disbursement
phones

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D7381

Date of Disbursement

10 / 12 / 2006

Amount of Each Disbursement this Period

429.94

B.

Full Name (Last, First, Middle Initial)

National City

Mailing Address 101 W Washington St

City
Indianapolis

State
IN

Zip Code
46204

Purpose of Disbursement
merchant fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D279816

Date of Disbursement

10 / 03 / 2006

Amount of Each Disbursement this Period

26.24

C.

Full Name (Last, First, Middle Initial)

National City

Mailing Address 101 W Washington St

City
Indianapolis

State
IN

Zip Code
46204

Purpose of Disbursement
merchant fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D279817

Date of Disbursement

10 / 12 / 2006

Amount of Each Disbursement this Period

17.50

SUBTOTAL of Disbursements This Page (optional)

473.68

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) National City	Transaction ID: D279819 Date of Disbursement																				
Mailing Address 101 W Washington St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	3		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	3		2	0	0	6												
City Indianapolis State IN Zip Code 46204	Amount of Each Disbursement this Period																				
Purpose of Disbursement merchant fee Candidate Name	<table border="1"> <tr> <td colspan="10">10.00</td> </tr> </table>	10.00																			
10.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Ms. Leatrice Webb-Parks	Transaction ID: D7256 Date of Disbursement																				
Mailing Address 5443 Milroy Rd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	3		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	3		2	0	0	6												
City Indianapolis State IN Zip Code 46216-2087	Amount of Each Disbursement this Period																				
Purpose of Disbursement marion co. payroll Candidate Name	<table border="1"> <tr> <td colspan="10">906.55</td> </tr> </table>	906.55																			
906.55																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Hoosier Trust Company	Transaction ID: D334330 Date of Disbursement																				
Mailing Address 9202 N Meridian St Ste 110	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	5		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	5		2	0	0	6												
City Indianapolis State IN Zip Code 46260-1810	Amount of Each Disbursement this Period																				
Purpose of Disbursement Bank fee Candidate Name	<table border="1"> <tr> <td colspan="10">253.71</td> </tr> </table>	253.71																			
253.71																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

1170.26

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) Laura Kirtley	Transaction ID: D7262 Date of Disbursement																				
Mailing Address 1001 Corregidor Cir	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	3		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	3		2	0	0	6												
City Evansville State IN Zip Code 47714-3213	Amount of Each Disbursement this Period																				
Purpose of Disbursement payroll Candidate Name	<table border="1"> <tr> <td colspan="10">988.66</td> </tr> </table>	988.66																			
988.66																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Old National Bank	Transaction ID: D280125 Date of Disbursement																				
Mailing Address PO Box 718	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	3		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	3		2	0	0	6												
City Evansville State IN Zip Code 47705-0718	Amount of Each Disbursement this Period																				
Purpose of Disbursement bank fee Candidate Name	<table border="1"> <tr> <td colspan="10">66.00</td> </tr> </table>	66.00																			
66.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Old National Bank	Transaction ID: D358584 Date of Disbursement																				
Mailing Address PO Box 718	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	3		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	3		2	0	0	6												
City Evansville State IN Zip Code 47705-0718	Amount of Each Disbursement this Period																				
Purpose of Disbursement Merchant Fees Candidate Name	<table border="1"> <tr> <td colspan="10">6.72</td> </tr> </table>	6.72																			
6.72																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

1061.38

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) Old National Bank	Transaction ID: D358585 Date of Disbursement																				
Mailing Address PO Box 718	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	0		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	0		2	0	0	6												
City Evansville State IN Zip Code 47705-0718	Amount of Each Disbursement this Period																				
Purpose of Disbursement Merchant Fees Candidate Name	<table border="1"> <tr> <td colspan="10">4.48</td> </tr> </table>	4.48																			
4.48																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Old National Bank	Transaction ID: D358586 Date of Disbursement																				
Mailing Address PO Box 718	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	0		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	0		2	0	0	6												
City Evansville State IN Zip Code 47705-0718	Amount of Each Disbursement this Period																				
Purpose of Disbursement Merchant Fees Candidate Name	<table border="1"> <tr> <td colspan="10">0.56</td> </tr> </table>	0.56																			
0.56																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Old National Bank	Transaction ID: D358587 Date of Disbursement																				
Mailing Address PO Box 718	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	2		2	0	0	6												
City Evansville State IN Zip Code 47705-0718	Amount of Each Disbursement this Period																				
Purpose of Disbursement Merchant Fees Candidate Name	<table border="1"> <tr> <td colspan="10">0.56</td> </tr> </table>	0.56																			
0.56																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

5.60

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Old National Bank</p> <p>Mailing Address PO Box 718</p> <p>City Evansville State IN Zip Code 47705-0718</p> <p>Purpose of Disbursement Merchant Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D358588</p> <p>Date of Disbursement 10 / 16 / 2006</p> <p>Amount of Each Disbursement this Period 2.24</p> <p>Category/ Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Old National Bank</p> <p>Mailing Address PO Box 718</p> <p>City Evansville State IN Zip Code 47705-0718</p> <p>Purpose of Disbursement Merchant Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D358589</p> <p>Date of Disbursement 10 / 17 / 2006</p> <p>Amount of Each Disbursement this Period 6.16</p> <p>Category/ Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) David Joseph</p> <p>Mailing Address 5812 Beatle Dr</p> <p>City Indianapolis State IN Zip Code 46216-2131</p> <p>Purpose of Disbursement payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D358600</p> <p>Date of Disbursement 10 / 12 / 2006</p> <p>Amount of Each Disbursement this Period 1427.21</p> <p>Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional)

1435.61

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) David Joseph	Transaction ID: D7328 Date of Disbursement																				
Mailing Address 5812 Beatle Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	3		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	3		2	0	0	6												
City Indianapolis State IN Zip Code 46216-2131	Amount of Each Disbursement this Period																				
Purpose of Disbursement payroll	<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>1427.21</td> </tr> </table>																				1427.21
									1427.21												
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Malden Express, LLC	Transaction ID: D7329 Date of Disbursement																				
Mailing Address 2021 E 52nd St Ste 101	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	1		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	1		2	0	0	6												
City Indianapolis State IN Zip Code 46205	Amount of Each Disbursement this Period																				
Purpose of Disbursement supplies	<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>198.91</td> </tr> </table>																				198.91
									198.91												
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Lord & Abbett	Transaction ID: D334332 Date of Disbursement																				
Mailing Address PO Box 219336	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	6		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	6		2	0	0	6												
City Kansas City State MO Zip Code 64121	Amount of Each Disbursement this Period																				
Purpose of Disbursement 401k	<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>872.49</td> </tr> </table>																				872.49
									872.49												
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

2498.61

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A.

Full Name (Last, First, Middle Initial)

Lord & Abbett

Mailing Address PO Box 219336

City
Kansas City

State
MO

Zip Code
64121

Purpose of Disbursement
401k

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D279182

Date of Disbursement

10 / 03 / 2006

Amount of Each Disbursement this Period

1372.49

B.

Full Name (Last, First, Middle Initial)

Lord & Abbett

Mailing Address PO Box 219336

City
Kansas City

State
MO

Zip Code
64121

Purpose of Disbursement
401k

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D279183

Date of Disbursement

10 / 03 / 2006

Amount of Each Disbursement this Period

1372.49

C.

Full Name (Last, First, Middle Initial)

Anthem Blue Cross and Blue Shield

Mailing Address PO Box 790444

City
Saint Louis

State
MO

Zip Code
63179

Purpose of Disbursement
health insurance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D244397

Date of Disbursement

10 / 12 / 2006

Amount of Each Disbursement this Period

8795.65

SUBTOTAL of Disbursements This Page (optional)

11540.63

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A.

Full Name (Last, First, Middle Initial)

Indiana Department of Revenue

Mailing Address 100 North Senate Ave

City
Indianapolis

State
IN

Zip Code
46204

Purpose of Disbursement
payroll taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D240791

Date of Disbursement

10 / 13 / 2006

Amount of Each Disbursement this Period

1450.62

B.

Full Name (Last, First, Middle Initial)

Indiana Department of Revenue

Mailing Address 100 North Senate Ave

City
Indianapolis

State
IN

Zip Code
46204

Purpose of Disbursement
payroll taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D241119

Date of Disbursement

10 / 13 / 2006

Amount of Each Disbursement this Period

36.66

C.

Full Name (Last, First, Middle Initial)

Indiana Department of Revenue

Mailing Address 100 North Senate Ave

City
Indianapolis

State
IN

Zip Code
46204

Purpose of Disbursement
payroll taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D7332

Date of Disbursement

10 / 13 / 2006

Amount of Each Disbursement this Period

1276.47

SUBTOTAL of Disbursements This Page (optional)

2763.75

TOTAL This Period (last page this line number only)

39043.51

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial)
Indiana Senate Democrats Committee

Mailing Address 1 N Capitol Ave
Ste 200

City Indianapolis State IN Zip Code 46204-2223

Purpose of Disbursement
contribution

Candidate Name
Indiana Senate Democrats Committee

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D241477

Date of Disbursement

10 / 12 / 2006

Amount of Each Disbursement this Period

25000.00

B. Full Name (Last, First, Middle Initial)
Mrs. Linda K. Harris

Mailing Address 11129 Peppermill Ln

City Fishers State IN Zip Code 46037-9082

Purpose of Disbursement
peterson payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D239636

Date of Disbursement

10 / 13 / 2006

Amount of Each Disbursement this Period

2761.38

C. Full Name (Last, First, Middle Initial)
Internal Revenue Service

Mailing Address Cincinnati Commerce Ctr

City Cincinnati State OH Zip Code 45999

Purpose of Disbursement
payroll taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D239029

Date of Disbursement

10 / 13 / 2006

Amount of Each Disbursement this Period

9395.90

SUBTOTAL of Disbursements This Page (optional)

37157.28

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) Internal Revenue Service	Transaction ID: D239030 Date of Disbursement
Mailing Address Cincinnati Commerce Ctr	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 1 3 / 2 0 0 6</div> </div>
City Cincinnati State OH Zip Code 45999	Amount of Each Disbursement this Period
Purpose of Disbursement payroll taxes Candidate Name	<div> <div>177.50</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Ms. Melissa A. Lear	Transaction ID: D7266 Date of Disbursement
Mailing Address 627 SE Riverside Dr Apt D	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 1 3 / 2 0 0 6</div> </div>
City Evansville State IN Zip Code 47713-1150	Amount of Each Disbursement this Period
Purpose of Disbursement carson payroll Candidate Name	<div> <div>1315.65</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Indiana Democratic State Committee	Transaction ID: D280086 Date of Disbursement
Mailing Address 1 N Capitol Ave Ste 200	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 1 2 / 2 0 0 6</div> </div>
City Indianapolis State IN Zip Code 46204-2223	Amount of Each Disbursement this Period
Purpose of Disbursement Transfer to NF for Cash flow Candidate Name Indiana Democratic State Committee	<div> <div>5000.00</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

6493.15

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial)
Indiana Democratic State Committee

Mailing Address 1 N Capitol Ave
Ste 200

City Indianapolis State IN Zip Code 46204-2223

Purpose of Disbursement
Transfer to NF for Cash Flow

Candidate Name
Indiana Democratic State Committee

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D358598

Date of Disbursement

10 / 12 / 2006

Amount of Each Disbursement this Period

779.04

B. Full Name (Last, First, Middle Initial)
Indiana Democratic State Committee

Mailing Address 1 N Capitol Ave
Ste 200

City Indianapolis State IN Zip Code 46204-2223

Purpose of Disbursement
Transfer of Allocation Transfer back to NF

Candidate Name
Indiana Democratic State Committee

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D364143

Date of Disbursement

10 / 18 / 2006

Amount of Each Disbursement this Period

2297.40

C. Full Name (Last, First, Middle Initial)
Mr. Terry Burns

Mailing Address 9432 Champton Dr

City Indianapolis State IN Zip Code 46256-1063

Purpose of Disbursement
marion co payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D7252

Date of Disbursement

10 / 13 / 2006

Amount of Each Disbursement this Period

1841.38

SUBTOTAL of Disbursements This Page (optional)

4917.82

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) National City Mailing Address 101 W Washington St	Transaction ID: D7286 Date of Disbursement <div> <div>10</div> <div>01</div> <div>2006</div> </div>
City Indianapolis State IN Zip Code 46204 Purpose of Disbursement credit card payment Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>209.09</div>
B. Full Name (Last, First, Middle Initial) National City Mailing Address 101 W Washington St	Transaction ID: D7287 Date of Disbursement <div> <div>10</div> <div>01</div> <div>2006</div> </div>
City Indianapolis State IN Zip Code 46204 Purpose of Disbursement credit card payment Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>438.52</div>
C. Full Name (Last, First, Middle Initial) National City Mailing Address 101 W Washington St	Transaction ID: D7288 Date of Disbursement <div> <div>10</div> <div>01</div> <div>2006</div> </div>
City Indianapolis State IN Zip Code 46204 Purpose of Disbursement credit card payment Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>107.47</div>

SUBTOTAL of Disbursements This Page (optional)

755.08

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) Ms. Monica Lee Swintz	Transaction ID: D7273 Date of Disbursement																				
Mailing Address 3920 Noth Pennsylvania	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	3		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	3		2	0	0	6												
City Indianapolis State IN Zip Code 46205	Amount of Each Disbursement this Period																				
Purpose of Disbursement bayh payroll	<table border="1"> <tr> <td colspan="10">653.13</td> </tr> </table>	653.13																			
653.13																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Ms. Monica Lee Swintz	Transaction ID: D7276 Date of Disbursement																				
Mailing Address 3920 Noth Pennsylvania	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	7		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	7		2	0	0	6												
City Indianapolis State IN Zip Code 46205	Amount of Each Disbursement this Period																				
Purpose of Disbursement bayh payroll	<table border="1"> <tr> <td colspan="10">368.06</td> </tr> </table>	368.06																			
368.06																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Mr. Joel Riethmiller	Transaction ID: D7269 Date of Disbursement																				
Mailing Address 506 N Indiana Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	3		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	3		2	0	0	6												
City Bloomington State IN Zip Code 47408-3620	Amount of Each Disbursement this Period																				
Purpose of Disbursement hill payroll	<table border="1"> <tr> <td colspan="10">783.85</td> </tr> </table>	783.85																			
783.85																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

1805.04

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) Mr Jeremy Howser Mailing Address 1214 Hatfield Dr	Transaction ID: D7162 Date of Disbursement <div> <div>10</div> <div>12</div> <div>2006</div> </div>
City Evansville State IN Zip Code 47714-0715 Purpose of Disbursement ellsworth payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>2090.92</div>
B. Full Name (Last, First, Middle Initial) Mrs. Abigail F. Curran Mailing Address 7930 Carrleigh Pkwy City Springfield State VA Zip Code 22152-1216 Purpose of Disbursement hill payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D7259 Date of Disbursement <div> <div>10</div> <div>13</div> <div>2006</div> </div> Amount of Each Disbursement this Period <div>3340.87</div>
C. Full Name (Last, First, Middle Initial) Kathie Nee Mailing Address 18011 Cleveland Rd City South Bend State IN Zip Code 46637-5064 Purpose of Disbursement donnelly payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D7268 Date of Disbursement <div> <div>10</div> <div>13</div> <div>2006</div> </div> Amount of Each Disbursement this Period <div>2047.33</div>

SUBTOTAL of Disbursements This Page (optional)

7479.12

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) Mr Peter Clerkin	Transaction ID: D7257 Date of Disbursement																				
Mailing Address 209 Three Rivers E	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	3		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	3		2	0	0	6												
City State Zip Code Fort Wayne IN 46802-1313	Amount of Each Disbursement this Period																				
Purpose of Disbursement hayhurst payroll Candidate Name	<table border="1"> <tr> <td colspan="10">1375.87</td> </tr> </table>	1375.87																			
1375.87																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Benjamin Kalish	Transaction ID: D7261 Date of Disbursement																				
Mailing Address 2019 Coachmans Trl	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	3		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	3		2	0	0	6												
City State Zip Code South Bend IN 46637-4923	Amount of Each Disbursement this Period																				
Purpose of Disbursement donnelly payroll Candidate Name	<table border="1"> <tr> <td colspan="10">1172.45</td> </tr> </table>	1172.45																			
1172.45																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Carrie L Solomon	Transaction ID: D7146 Date of Disbursement																				
Mailing Address 803 Canterbury Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	2		2	0	0	6												
City State Zip Code Evansville IN 47715-4231	Amount of Each Disbursement this Period																				
Purpose of Disbursement ellsworth payroll Candidate Name	<table border="1"> <tr> <td colspan="10">943.76</td> </tr> </table>	943.76																			
943.76																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

3492.08

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A.

Full Name (Last, First, Middle Initial)

Carrie L Solomon

Mailing Address 803 Canterbury Dr

City
Evansville

State
IN

Zip Code
47715-4231

Purpose of Disbursement
ellsworth payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7272

Date of Disbursement

10 / 13 / 2006

Amount of Each Disbursement this Period

943.76

B.

Full Name (Last, First, Middle Initial)

Mr. Andrew Blair Lattanner

Mailing Address 51223 Hunting Ridge Trl N

City
Granger

State
IN

Zip Code
46530-6564

Purpose of Disbursement
donnelly payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7264

Date of Disbursement

10 / 13 / 2006

Amount of Each Disbursement this Period

991.00

C.

Full Name (Last, First, Middle Initial)

Elliott J Magers

Mailing Address 7370 N 850 East

City
Brownsburg

State
IN

Zip Code
46112

Purpose of Disbursement
hill payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7267

Date of Disbursement

10 / 13 / 2006

Amount of Each Disbursement this Period

707.57

SUBTOTAL of Disbursements This Page (optional)

2642.33

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) George Guido	Transaction ID: D7260 Date of Disbursement																				
Mailing Address 4610 Williamsburg Ct	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	3		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	3		2	0	0	6												
City Fort Wayne State IN Zip Code 46804-4009	Amount of Each Disbursement this Period																				
Purpose of Disbursement hayhurst payroll Candidate Name	<table border="1"> <tr> <td colspan="10">966.22</td> </tr> </table>	966.22																			
966.22																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Mr. Andrew S Cullen	Transaction ID: D358605 Date of Disbursement																				
Mailing Address 821 N Main St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	3		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	3		2	0	0	6												
City Bicknell State IN Zip Code 47512-1319	Amount of Each Disbursement this Period																				
Purpose of Disbursement bayh payroll Candidate Name	<table border="1"> <tr> <td colspan="10">995.36</td> </tr> </table>	995.36																			
995.36																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Meagan Sims	Transaction ID: D7270 Date of Disbursement																				
Mailing Address 1428 N County Road 175 W	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	3		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	3		2	0	0	6												
City Greencastle State IN Zip Code 46135-9294	Amount of Each Disbursement this Period																				
Purpose of Disbursement carson payroll Candidate Name	<table border="1"> <tr> <td colspan="10">779.04</td> </tr> </table>	779.04																			
779.04																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

2740.62

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) Mr. Trent Deckard	Transaction ID: D238247 Date of Disbursement																				
Mailing Address 2609 S Southern Ridge Ct	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	3		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	3		2	0	0	6												
City State Zip Code Bloomington IN 47403-3415	Amount of Each Disbursement this Period																				
Purpose of Disbursement house payroll Candidate Name	<table border="1"> <tr> <td colspan="10">1024.71</td> </tr> </table>	1024.71																			
1024.71																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Mr Nicholas Grawcock	Transaction ID: D7275 Date of Disbursement																				
Mailing Address 5954 Dewey Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	3		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	3		2	0	0	6												
City State Zip Code Indianapolis IN 46219-7209	Amount of Each Disbursement this Period																				
Purpose of Disbursement marion co. payroll Candidate Name	<table border="1"> <tr> <td colspan="10">784.80</td> </tr> </table>	784.80																			
784.80																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Ms. Angela M. Nussmeyer	Transaction ID: D238434 Date of Disbursement																				
Mailing Address 1022 N Downey Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	3		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	3		2	0	0	6												
City State Zip Code Indianapolis IN 46219-3005	Amount of Each Disbursement this Period																				
Purpose of Disbursement senate payroll Candidate Name	<table border="1"> <tr> <td colspan="10">1271.03</td> </tr> </table>	1271.03																			
1271.03																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

3080.54

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Derek J. Sublette

Mailing Address 540 N Oriental St

City
Indianapolis

State
IN

Zip Code
46202-3559

Purpose of Disbursement
pearson payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D237972

Date of Disbursement

10 / 13 / 2006

Amount of Each Disbursement this Period

1297.78

B.

Full Name (Last, First, Middle Initial)

Mrs. Michele Miller

Mailing Address 11342 Fairweather Pl

City
Indianapolis

State
IN

Zip Code
46229-4982

Purpose of Disbursement
peterson payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D238733

Date of Disbursement

10 / 13 / 2006

Amount of Each Disbursement this Period

1176.79

C.

Full Name (Last, First, Middle Initial)

Mr. Tim Moriarty

Mailing Address 129 Catherine Dr

City
Carmel

State
IN

Zip Code
46032-1421

Purpose of Disbursement
marion co. payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D242164

Date of Disbursement

10 / 13 / 2006

Amount of Each Disbursement this Period

637.34

SUBTOTAL of Disbursements This Page (optional)

3111.91

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) Ms. Mary Morgan	Transaction ID: D242689 Date of Disbursement																				
Mailing Address 19070 Edinburgh Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	3		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	3		2	0	0	6												
City South Bend State IN Zip Code 46614	Amount of Each Disbursement this Period																				
Purpose of Disbursement senate field staff Candidate Name	<table border="1"> <tr> <td colspan="10">250.00</td> </tr> </table>	250.00																			
250.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Ms. Mary Morgan	Transaction ID: D242690 Date of Disbursement																				
Mailing Address 19070 Edinburgh Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	2		2	0	0	6												
City South Bend State IN Zip Code 46614	Amount of Each Disbursement this Period																				
Purpose of Disbursement senate field staff Candidate Name	<table border="1"> <tr> <td colspan="10">250.00</td> </tr> </table>	250.00																			
250.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Ms. Kelly Earls	Transaction ID: D242736 Date of Disbursement																				
Mailing Address 8813 Blooming Grove Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	2		2	0	0	6												
City Camby State IN Zip Code 46113	Amount of Each Disbursement this Period																				
Purpose of Disbursement senate field staff Candidate Name	<table border="1"> <tr> <td colspan="10">500.00</td> </tr> </table>	500.00																			
500.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) Ms. Kelly Earls	Transaction ID: D242737 Date of Disbursement
Mailing Address 8813 Blooming Grove Dr	<div> <div>10</div> <div>12</div> <div>2006</div> </div>
City Camby State IN Zip Code 46113	Amount of Each Disbursement this Period
Purpose of Disbursement senate field staff Candidate Name	<div>500.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Ms. Joanna Penn	Transaction ID: D242740 Date of Disbursement
Mailing Address 6188 E County Rd 900 S	<div> <div>10</div> <div>12</div> <div>2006</div> </div>
City Marengo State IN Zip Code 46140	Amount of Each Disbursement this Period
Purpose of Disbursement field staff Candidate Name	<div>500.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Ms. Joanna Penn	Transaction ID: D242741 Date of Disbursement
Mailing Address 6188 E County Rd 900 S	<div> <div>10</div> <div>12</div> <div>2006</div> </div>
City Marengo State IN Zip Code 46140	Amount of Each Disbursement this Period
Purpose of Disbursement field staff Candidate Name	<div>500.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A.

Full Name (Last, First, Middle Initial)

Battles for State Rep.

Mailing Address 2712 Peachtree Ter

City
Vincennes

State
IN

Zip Code
47591

Purpose of Disbursement
leg coord

Candidate Name
Battles for State Rep.

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D242746

Date of Disbursement

10 / 12 / 2006

Amount of Each Disbursement this Period

30000.00

B.

Full Name (Last, First, Middle Initial)

Ms Karina E. Straub

Mailing Address 1451 Central Ave Apt 107

City
Indianapolis

State
IN

Zip Code
46202

Purpose of Disbursement
kennedy payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D242770

Date of Disbursement

10 / 13 / 2006

Amount of Each Disbursement this Period

1119.59

C.

Full Name (Last, First, Middle Initial)

Ms. Jennifer L. Grawcock

Mailing Address 5954 Dewey Ave

City
Indianapolis

State
IN

Zip Code
46219

Purpose of Disbursement
marion co payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D7254

Date of Disbursement

10 / 13 / 2006

Amount of Each Disbursement this Period

1427.54

SUBTOTAL of Disbursements This Page (optional)

32547.13

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) Ms Kristen L Self	Transaction ID: D242994 Date of Disbursement																				
Mailing Address 8813 Sunbow Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	3		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	3		2	0	0	6												
City Indianapolis State IN Zip Code 46231	Amount of Each Disbursement this Period																				
Purpose of Disbursement house payroll Candidate Name	<table border="1"> <tr> <td colspan="10">1532.29</td> </tr> </table>	1532.29																			
1532.29																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Ms. Myla Eldridge	Transaction ID: D243573 Date of Disbursement																				
Mailing Address 2017 W 63rd St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	3		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	3		2	0	0	6												
City Indianapolis State IN Zip Code 46260	Amount of Each Disbursement this Period																				
Purpose of Disbursement marion co payroll Candidate Name	<table border="1"> <tr> <td colspan="10">1142.01</td> </tr> </table>	1142.01																			
1142.01																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Ms Amy Jacobson	Transaction ID: D243646 Date of Disbursement																				
Mailing Address 5109 Tuscany Ln	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	3		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	3		2	0	0	6												
City Indianapolis State IN Zip Code 46254	Amount of Each Disbursement this Period																				
Purpose of Disbursement senate payroll Candidate Name	<table border="1"> <tr> <td colspan="10">693.48</td> </tr> </table>	693.48																			
693.48																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

3367.78

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A.

Full Name (Last, First, Middle Initial)

Ms Nerrissa Phillips-Murray

Mailing Address 4851 Lakeshore Pl Apt 2812

City Indianapolis State IN Zip Code 46250

Purpose of Disbursement
field staff

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D242695

Date of Disbursement

10 / 13 / 2006

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Mrs. Amy Clinton-Corbett

Mailing Address 1420 Shining Armor Ln

City West Lafayette State IN Zip Code 47906

Purpose of Disbursement
field staff

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D243707

Date of Disbursement

10 / 13 / 2006

Amount of Each Disbursement this Period

750.00

C.

Full Name (Last, First, Middle Initial)

Mr. Matthew Mooney

Mailing Address 1006 Lancashire Ln

City Pendleton State IN Zip Code 46064

Purpose of Disbursement
field staff

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D243760

Date of Disbursement

10 / 13 / 2006

Amount of Each Disbursement this Period

750.00

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) Ms. Megan Giles	Transaction ID: D243793 Date of Disbursement
Mailing Address 3055 N Meridian St Apt 3	<div> <div>10</div> <div>13</div> <div>2006</div> </div>
City Indianapolis State IN Zip Code 46208	Amount of Each Disbursement this Period
Purpose of Disbursement field staff	<div>1103.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Mrs. Barbara Ziemer	Transaction ID: D243834 Date of Disbursement
Mailing Address 804 Kingswood Dr	<div> <div>10</div> <div>13</div> <div>2006</div> </div>
City Evansville State IN Zip Code 47715	Amount of Each Disbursement this Period
Purpose of Disbursement weinzapfel payroll	<div>682.92</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Mr. Timothy J. Jeffers	Transaction ID: D241728 Date of Disbursement
Mailing Address 6854 Chorleywood Cir	<div> <div>10</div> <div>13</div> <div>2006</div> </div>
City Indianapolis State IN Zip Code 46259-5501	Amount of Each Disbursement this Period
Purpose of Disbursement payroll	<div>2626.54</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

4412.46

TOTAL This Period (last page this line number only)

118502.34

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A.

Full Name (Last, First, Middle Initial)

Purchase Power

Mailing Address PO Box 856042

City
Louisville

State
KY

Zip Code
40285-6042

Purpose of Disbursement
postage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D334326

Date of Disbursement

10 / 02 / 2006

Amount of Each Disbursement this Period

18710.59

B.

Full Name (Last, First, Middle Initial)

Purchase Power

Mailing Address PO Box 856042

City
Louisville

State
KY

Zip Code
40285-6042

Purpose of Disbursement
Postage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D334327

Date of Disbursement

10 / 05 / 2006

Amount of Each Disbursement this Period

16961.03

C.

Full Name (Last, First, Middle Initial)

Purchase Power

Mailing Address PO Box 856042

City
Louisville

State
KY

Zip Code
40285-6042

Purpose of Disbursement
Postage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D334328

Date of Disbursement

10 / 10 / 2006

Amount of Each Disbursement this Period

1443.94

SUBTOTAL of Disbursements This Page (optional)

37115.56

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A.

Full Name (Last, First, Middle Initial)

Abraham J. Hall

Mailing Address 617 W Mulberry St

City
Kokomo

State
IN

Zip Code
46901-4481

Purpose of Disbursement
field staff

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7255

Date of Disbursement

/ /

Amount of Each Disbursement this Period

550.00

B.

Full Name (Last, First, Middle Initial)

Mr. Daniel J Parker

Mailing Address 7458 Rooses Way

City
Indianapolis

State
IN

Zip Code
46217-5484

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8034

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2828.29

C.

Full Name (Last, First, Middle Initial)

Andrew Homan

Mailing Address 419 Highland Ave

City
New Albany

State
IN

Zip Code
47150-5227

Purpose of Disbursement
field staff

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D358603

Date of Disbursement

/ /

Amount of Each Disbursement this Period

900.00

SUBTOTAL of Disbursements This Page (optional)

4278.29

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) Ms Elizabeth Palmquist	Transaction ID: D238425 Date of Disbursement																				
Mailing Address 705 Dogwood Rd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	3		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	3		2	0	0	6												
City Jeffersonville State IN Zip Code 47130-5417	Amount of Each Disbursement this Period																				
Purpose of Disbursement field staff	<table border="1"> <tr> <td colspan="10">750.00</td> </tr> </table>	750.00																			
750.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Groundswell Communications	Transaction ID: D7311 Date of Disbursement																				
Mailing Address 101 N Union St Suite 305	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	1		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	1		2	0	0	6												
City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period																				
Purpose of Disbursement Voter ID Calls	<table border="1"> <tr> <td colspan="10">1750.00</td> </tr> </table>	1750.00																			
1750.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Ms. Jennifer D. Hill	Transaction ID: D7302 Date of Disbursement																				
Mailing Address 1128 E 56th St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	3		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	3		2	0	0	6												
City Indianapolis State IN Zip Code 46220-3222	Amount of Each Disbursement this Period																				
Purpose of Disbursement payroll	<table border="1"> <tr> <td colspan="10">1718.50</td> </tr> </table>	1718.50																			
1718.50																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

4218.50

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) Peter D Hart Research	Transaction ID: D238081 Date of Disbursement																				
Mailing Address 1724 Connecticut Ave NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	2		2	0	0	6												
City Washington State DC Zip Code 20009-1103	Amount of Each Disbursement this Period																				
Purpose of Disbursement polling	<table border="1"> <tr> <td>5</td><td>5</td><td>2</td><td>0</td><td>0</td><td>.</td><td>0</td><td>0</td> </tr> </table>	5	5	2	0	0	.	0	0												
5	5	2	0	0	.	0	0														
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Peter D Hart Research	Transaction ID: D238083 Date of Disbursement																				
Mailing Address 1724 Connecticut Ave NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	2		2	0	0	6												
City Washington State DC Zip Code 20009-1103	Amount of Each Disbursement this Period																				
Purpose of Disbursement survey	<table border="1"> <tr> <td>5</td><td>2</td><td>5</td><td>0</td><td>0</td><td>.</td><td>0</td><td>0</td> </tr> </table>	5	2	5	0	0	.	0	0												
5	2	5	0	0	.	0	0														
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Peter D Hart Research	Transaction ID: D280094 Date of Disbursement																				
Mailing Address 1724 Connecticut Ave NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	2		2	0	0	6												
City Washington State DC Zip Code 20009-1103	Amount of Each Disbursement this Period																				
Purpose of Disbursement research	<table border="1"> <tr> <td>8</td><td>4</td><td>0</td><td>0</td><td>.</td><td>0</td><td>0</td> </tr> </table>	8	4	0	0	.	0	0													
8	4	0	0	.	0	0															
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

116100.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Kathryn Murphy</p> <p>Mailing Address 5477 Village Green Ct Apt B</p> <p>City Terre Haute State IN Zip Code 47803-4279</p> <p>Purpose of Disbursement field staff</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D7263</p> <p>Date of Disbursement <div> <div>10</div> <div>13</div> <div>2006</div> </div> </p> <p>Amount of Each Disbursement this Period <div>825.00</div> </p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Brian Connell</p> <p>Mailing Address 1290 Hatfield Drive Apt. 1140</p> <p>City Evansville State IN Zip Code 47714</p> <p>Purpose of Disbursement field staff</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D358604</p> <p>Date of Disbursement <div> <div>10</div> <div>13</div> <div>2006</div> </div> </p> <p>Amount of Each Disbursement this Period <div>825.00</div> </p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Andrew Smith</p> <p>Mailing Address 460 E Meade Dr</p> <p>City Evansville State IN Zip Code 47715-3706</p> <p>Purpose of Disbursement field staff</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D7271</p> <p>Date of Disbursement <div> <div>10</div> <div>13</div> <div>2006</div> </div> </p> <p>Amount of Each Disbursement this Period <div>825.00</div> </p>

SUBTOTAL of Disbursements This Page (optional)

2475.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) Dustin Blythe	Transaction ID: D7327 Date of Disbursement																				
Mailing Address 1732 1/2 Lincolnway E	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	3		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	3		2	0	0	6												
City Mishawaka State IN Zip Code 46544-3116	Amount of Each Disbursement this Period																				
Purpose of Disbursement field staff	<table border="1"> <tr> <td colspan="10">750.00</td> </tr> </table>	750.00																			
750.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Dustin Blythe	Transaction ID: D364142 Date of Disbursement																				
Mailing Address 1732 1/2 Lincolnway E	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	2		2	0	0	6												
City Mishawaka State IN Zip Code 46544-3116	Amount of Each Disbursement this Period																				
Purpose of Disbursement field staff	<table border="1"> <tr> <td colspan="10">750.00</td> </tr> </table>	750.00																			
750.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Maria Angelica Aguayo	Transaction ID: D7253 Date of Disbursement																				
Mailing Address 3040 East County Rd 200 North	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	3		2	0	0	6
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1	0		1	3		2	0	0	6												
City North Vernon State IN Zip Code 47265	Amount of Each Disbursement this Period																				
Purpose of Disbursement field staff	<table border="1"> <tr> <td colspan="10">550.00</td> </tr> </table>	550.00																			
550.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

2050.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) John Yaggi	Transaction ID: D7274 Date of Disbursement																				
Mailing Address 2528 Walnut Pike Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	2		2	0	0	6												
City Bloomington State IN Zip Code 47401	Amount of Each Disbursement this Period																				
Purpose of Disbursement field staff	<table border="1"> <tr> <td colspan="10">900.00</td> </tr> </table>	900.00																			
900.00																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Phillippe Carroll	Transaction ID: D7152 Date of Disbursement																				
Mailing Address 6109 Waterside Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	2		2	0	0	6												
City Fort Wayne State IN Zip Code 46814-3267	Amount of Each Disbursement this Period																				
Purpose of Disbursement field staff	<table border="1"> <tr> <td colspan="10">500.00</td> </tr> </table>	500.00																			
500.00																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Ourso Beychok Johnson	Transaction ID: D7309 Date of Disbursement																				
Mailing Address 352 Napoleon St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	5		2	0	0	6
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1	0		0	5		2	0	0	6												
City Baton Rouge State LA Zip Code 70802-5939	Amount of Each Disbursement this Period																				
Purpose of Disbursement direct mail	<table border="1"> <tr> <td colspan="10">24900.00</td> </tr> </table>	24900.00																			
24900.00																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

26300.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A.

Full Name (Last, First, Middle Initial)

Ourso Beychok Johnson

Mailing Address 352 Napoleon St

City State Zip Code
Baton Rouge LA 70802-5939

Purpose of Disbursement
direct mail

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D7310

Date of Disbursement

10 / 03 / 2006

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Greg Neil

Mailing Address 612 W Howe St

City State Zip Code
Bloomington IN 47403-2231

Purpose of Disbursement
field staff

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D7265

Date of Disbursement

10 / 13 / 2006

Amount of Each Disbursement this Period

1200.00

C.

Full Name (Last, First, Middle Initial)

Ms. Christen A Commers

Mailing Address 5698 W Pleasant Hills Trl

City State Zip Code
La Porte IN 46350-8448

Purpose of Disbursement
field staff

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D7315

Date of Disbursement

10 / 13 / 2006

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional)

7700.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Travis Levett</p> <p>Mailing Address 5477 Village Green Ct Apt B</p> <p>City Terre Haute State IN Zip Code 47803-4279</p> <p>Purpose of Disbursement field staff</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D7316</p> <p>Date of Disbursement <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div> <div>1 0</div> <div>0 2</div> <div>2 0 0 6</div> </div> </p> <p>Amount of Each Disbursement this Period <div>1650.00</div> </p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Travis Levett</p> <p>Mailing Address 5477 Village Green Ct Apt B</p> <p>City Terre Haute State IN Zip Code 47803-4279</p> <p>Purpose of Disbursement field staff</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D7317</p> <p>Date of Disbursement <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div> <div>1 0</div> <div>1 3</div> <div>2 0 0 6</div> </div> </p> <p>Amount of Each Disbursement this Period <div>825.00</div> </p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Priscilla Harden</p> <p>Mailing Address 3972 S US Highway 41</p> <p>City Terre Haute State IN Zip Code 47802-4110</p> <p>Purpose of Disbursement canvass</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D7318</p> <p>Date of Disbursement <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div> <div>1 0</div> <div>1 2</div> <div>2 0 0 6</div> </div> </p> <p>Amount of Each Disbursement this Period <div>40.00</div> </p>

SUBTOTAL of Disbursements This Page (optional)

2515.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) Brandon Dieg	Transaction ID: D7320 Date of Disbursement																				
Mailing Address 7130 Carson School Rd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	2		2	0	0	6												
City Mount Vernon State IN Zip Code 47620-8424	Amount of Each Disbursement this Period																				
Purpose of Disbursement canvass	<table border="1"> <tr> <td>40.00</td> </tr> </table>	40.00																			
40.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Natalie Wolf	Transaction ID: D7322 Date of Disbursement																				
Mailing Address 2516 Stringtown Rd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	2		2	0	0	6												
City Evansville State IN Zip Code 47711-3363	Amount of Each Disbursement this Period																				
Purpose of Disbursement canvass	<table border="1"> <tr> <td>80.00</td> </tr> </table>	80.00																			
80.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Natalie Wolf	Transaction ID: D7345 Date of Disbursement																				
Mailing Address 2516 Stringtown Rd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	2		2	0	0	6												
City Evansville State IN Zip Code 47711-3363	Amount of Each Disbursement this Period																				
Purpose of Disbursement canvasser	<table border="1"> <tr> <td>240.00</td> </tr> </table>	240.00																			
240.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

360.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) Matthew Eickhoff Mailing Address 10830 Sunset Dr	Transaction ID: D7323 Date of Disbursement <div> <div>10</div> <div>12</div> <div>2006</div> </div>
City Evansville State IN Zip Code 47712-9561 Purpose of Disbursement canvass Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>40.00</div>
B. Full Name (Last, First, Middle Initial) Frank Cloyd Mailing Address 3972 S US Highway 41 City Terre Haute State IN Zip Code 47802-4110 Purpose of Disbursement canvass Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D7324 Date of Disbursement <div> <div>10</div> <div>12</div> <div>2006</div> </div> Amount of Each Disbursement this Period <div>120.00</div>
C. Full Name (Last, First, Middle Initial) Sean Feaney Mailing Address 3972 S US Highway 41 City Terre Haute State IN Zip Code 47802-4110 Purpose of Disbursement canvass Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D7325 Date of Disbursement <div> <div>10</div> <div>12</div> <div>2006</div> </div> Amount of Each Disbursement this Period <div>80.00</div>

SUBTOTAL of Disbursements This Page (optional)

240.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) Clinton Jenkins	Transaction ID: D7326 Date of Disbursement																				
Mailing Address 3972 S US Highway 41	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	2		2	0	0	6												
City State Zip Code Terre Haute IN 47802-4110	Amount of Each Disbursement this Period																				
Purpose of Disbursement canvass Candidate Name	<table border="1"> <tr> <td colspan="10">200.00</td> </tr> </table>	200.00																			
200.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Kris Bullock	Transaction ID: D7319 Date of Disbursement																				
Mailing Address 72 Allendale	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	2		2	0	0	6												
City State Zip Code Terre Haute IN 47802-4751	Amount of Each Disbursement this Period																				
Purpose of Disbursement canvass Candidate Name	<table border="1"> <tr> <td colspan="10">200.00</td> </tr> </table>	200.00																			
200.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Hunter Bullock	Transaction ID: D7321 Date of Disbursement																				
Mailing Address 72 Allendale	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	2		2	0	0	6												
City State Zip Code Terre Haute IN 47802-4751	Amount of Each Disbursement this Period																				
Purpose of Disbursement canvass Candidate Name	<table border="1"> <tr> <td colspan="10">200.00</td> </tr> </table>	200.00																			
200.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

600.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) Emily Morris	Transaction ID: D358601 Date of Disbursement
Mailing Address 135 N Lafayette Blvd	<div> <div>10</div> <div>13</div> <div>2006</div> </div>
City South Bend State IN Zip Code 46601-1507	Amount of Each Disbursement this Period
Purpose of Disbursement field staff Candidate Name	<div>333.33</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Melanie Morris	Transaction ID: D358602 Date of Disbursement
Mailing Address 10659 N County Road 800 E	<div> <div>10</div> <div>13</div> <div>2006</div> </div>
City Seymour State IN Zip Code 47274-9198	Amount of Each Disbursement this Period
Purpose of Disbursement field staff Candidate Name	<div>950.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Mack Crounse Group LLC	Transaction ID: D7307 Date of Disbursement
Mailing Address 4900 Seminary Rd Ste 1020	<div> <div>10</div> <div>18</div> <div>2006</div> </div>
City Alexandria State VA Zip Code 22311	Amount of Each Disbursement this Period
Purpose of Disbursement direct mail Candidate Name	<div>16790.25</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

18073.58

TOTAL This Period (last page this line number only)

	21b		22		23		24		25		26
	27		28a		28b		28c		29		x 30b

Indiana Democratic Congressional Victory Committee

MM / DD / YYYY

State: District:

Three digital displays showing the date 10/13/2006 in MM/DD/YYYY format. The first display shows '10' with 'M' above it. The second display shows '13' with 'D' above it. The third display shows '2006' with 'Y' above each digit.

State: District:

Three digital displays showing the date 10/13/2006 in MM/DD/YYYY format. The first display shows '10' with 'M' above each digit. The second display shows '13' with 'D' above each digit. The third display shows '2006' with 'Y' above each digit. The displays are separated by slashes.

State: District:

FEC Schedule B (Form 3X) (Revised 02/2003)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) Mr. Scott Liggett	Transaction ID: D242731 Date of Disbursement																				
Mailing Address 1113 Climbing Rose Ln	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	3		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	3		2	0	0	6												
City Mishawaka State IN Zip Code 46544	Amount of Each Disbursement this Period																				
Purpose of Disbursement field staff Candidate Name	<table border="1"> <tr> <td colspan="10">250.00</td> </tr> </table>	250.00																			
250.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Mr. Todd Grocki	Transaction ID: D242745 Date of Disbursement																				
Mailing Address 111 NW 4th St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	3		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	3		2	0	0	6												
City Evansville State IN Zip Code 47708	Amount of Each Disbursement this Period																				
Purpose of Disbursement field staff Candidate Name	<table border="1"> <tr> <td colspan="10">900.00</td> </tr> </table>	900.00																			
900.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Mr. John E. E. Miller	Transaction ID: D364134 Date of Disbursement																				
Mailing Address 10132 Bitterroot Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	2		2	0	0	6												
City Fort Wayne State IN Zip Code 46804	Amount of Each Disbursement this Period																				
Purpose of Disbursement field staff Candidate Name	<table border="1"> <tr> <td colspan="10">900.00</td> </tr> </table>	900.00																			
900.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

2050.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) EasyPermit Postage	Transaction ID: D7312 Date of Disbursement
Mailing Address PO Box 856042	<div> <div>10</div> <div>05</div> <div>2006</div> </div>
City Louisville State KY Zip Code 40285	Amount of Each Disbursement this Period
Purpose of Disbursement postage-direct mail Candidate Name	<div>618.81</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Ms. Katherine Carlson	Transaction ID: D243697 Date of Disbursement
Mailing Address 1235 N Delaware St Apt 206	<div> <div>10</div> <div>12</div> <div>2006</div> </div>
City Indianapolis State IN Zip Code 46202	Amount of Each Disbursement this Period
Purpose of Disbursement field staff Candidate Name	<div>750.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Mrs. Amy Clinton-Corbett	Transaction ID: D280097 Date of Disbursement
Mailing Address 1420 Shining Armor Ln	<div> <div>10</div> <div>12</div> <div>2006</div> </div>
City West Lafayette State IN Zip Code 47906	Amount of Each Disbursement this Period
Purpose of Disbursement field staff Candidate Name	<div>600.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

1968.81

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Sara Foor

Mailing Address 1615 Knox Dr

City
New Haven

State
IN

Zip Code
46774

Purpose of Disbursement
field staff

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D243722

Date of Disbursement

10 / 13 / 2006

Amount of Each Disbursement this Period

750.00

B.

Full Name (Last, First, Middle Initial)

Ms. Emily Liddle

Mailing Address 5547 Winthrop Ave Apt B

City
Indianapolis

State
IN

Zip Code
46220

Purpose of Disbursement
field staff

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D364141

Date of Disbursement

10 / 13 / 2006

Amount of Each Disbursement this Period

750.00

C.

Full Name (Last, First, Middle Initial)

Ms. Emily Liddle

Mailing Address 5547 Winthrop Ave Apt B

City
Indianapolis

State
IN

Zip Code
46220

Purpose of Disbursement
field staff

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D358599

Date of Disbursement

10 / 12 / 2006

Amount of Each Disbursement this Period

750.00

SUBTOTAL of Disbursements This Page (optional)

2250.00

TOTAL This Period (last page this line number only)

	21b		22		23		24		25		26
	27		28a		28b		28c		29	x	30b

Indiana Democratic Congressional Victory Committee

FEC Schedule B (Form 3X) (Revised 02/2003)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) Mr. Michael Kostyo	Transaction ID: D243876 Date of Disbursement																				
Mailing Address 71 Chateau Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	3		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	3		2	0	0	6												
City Dyer State IN Zip Code 46311	Amount of Each Disbursement this Period																				
Purpose of Disbursement field staff Candidate Name	<table border="1"> <tr> <td colspan="10">500.00</td> </tr> </table>	500.00																			
500.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Mr. Matthew C. Randall	Transaction ID: D243884 Date of Disbursement																				
Mailing Address 6811 E Ann St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	3		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	3		2	0	0	6												
City Camby State IN Zip Code 46113	Amount of Each Disbursement this Period																				
Purpose of Disbursement field staff Candidate Name	<table border="1"> <tr> <td colspan="10">500.00</td> </tr> </table>	500.00																			
500.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Ms. Katherine A. Johnson	Transaction ID: D243892 Date of Disbursement																				
Mailing Address 120 East Brooklyn Count #14	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	3		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	3		2	0	0	6												
City Muncie State IN Zip Code 47303	Amount of Each Disbursement this Period																				
Purpose of Disbursement field staff Candidate Name	<table border="1"> <tr> <td colspan="10">500.00</td> </tr> </table>	500.00																			
500.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Katherine A. Johnson

Mailing Address 120 East Brooklyn Count #14

City State Zip Code
Muncie IN 47303

Purpose of Disbursement
field staff

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D364131

Date of Disbursement

/ /

Amount of Each Disbursement this Period

750.00

SUBTOTAL of Disbursements This Page (optional)

750.00

TOTAL This Period (last page this line number only)

253909.24

SCHEDULE F (FEC Form 3X)**ITEMIZED COORDINATED EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

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FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) Indiana Democratic Congressional Victory Committee		<input type="checkbox"/> Check if 24-hour notice	
Has your committee been designated to make coordinated expenditures by a political party committee? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		Full Name of Subordinate Committee Indiana Democratic Congressional Victory Committee	
If YES, name the designating committee:		Mailing Address One North Capitol Suite 200	
		City Indianapolis	State IN ZIP Code 46204
Full Name (Last, First, Middle Initial) of Each Payee Peter D Hart Research		Purpose of Expenditure direct mail	<input type="text"/> Category/Type
Mailing Address 1724 Connecticut Ave NW			
City Washington	State DC	ZIP Code 20009-1103	
Name of Federal Candidate Supported Honorable Baron P. Hill	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	Date M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 6	
State: IN District: 09		Amount 25000.00	
Aggregate General Election Expenditure for this Candidate ► 25000.00		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
Transaction ID: D7306			

SUBTOTAL of Expenditures This Page (optional)	►	25000.00
TOTAL This Period (last page this line number only)	►	25000.00

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 65 / 84
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

NAME OF ACCOUNT
 IDP NonFederal

DATE OF RECEIPT

M M / D D / Y Y Y Y
 1 0 / 1 0 / 2 0 0 6

TOTAL AMOUNT TRANSFERRED

55200.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

55200.00

Transaction ID: T1849

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 66 / 84
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

NAME OF ACCOUNT
 IDP NonFederal

DATE OF RECEIPT

M M / D D / Y Y Y Y
 1 0 / 1 8 / 2 0 0 6

TOTAL AMOUNT TRANSFERRED

1675.96

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

1675.96

Transaction ID: T1851

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 67 / 84

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

NAME OF ACCOUNT

IDP NonFederal

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	0	6

TOTAL AMOUNT TRANSFERRED

52500.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

52500.00

Transaction ID: T1866

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 68 / 84
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

NAME OF ACCOUNT
 IDP NonFederal

DATE OF RECEIPT

M M / D D / Y Y Y Y
 1 0 / 1 7 / 2 0 0 6

TOTAL AMOUNT TRANSFERRED

2297.40

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

2297.40

Transaction ID: T1867

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 69 / 84
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

NAME OF ACCOUNT
 Non-Federal

DATE OF RECEIPT

M M / D D / Y Y Y Y
 1 0 / 1 8 / 2 0 0 6

TOTAL AMOUNT TRANSFERRED

3554.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

3554.00

Transaction ID: T2006

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 70 / 84
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

NAME OF ACCOUNT
 Indiana Democratic
 S

DATE OF RECEIPT

M M / D D / Y Y Y Y
 1 0 / 0 1 / 2 0 0 6

TOTAL AMOUNT TRANSFERRED

33031.35

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

33031.35

Transaction ID: T380

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 71 / 84
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

NAME OF ACCOUNT

Indiana Democratic
S

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	2		2	0	0	6

TOTAL AMOUNT TRANSFERRED

2328.32

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

2328.32

Transaction ID: T381

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

150587.03

TOTAL This Period (Generic Voter Drive)

0.00

TOTAL This Period (Exempt Activities)

0.00

TOTAL This Period (Direct Fundraising)

0.00

TOTAL This Period (Direct Candidate Support)

0.00

TOTAL This Period (Public Communications Referring Only to Party)

0.00

TOTAL This Period (Total Amount Transferred)

150587.03

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial)

Mr. Michael D. Edmondson

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

620623.49

Mailing Address

1530 E 81st St

City

State

Zip Code

Indianapolis

IN

46240-2716

Purpose of Disbursement:
payrollCategory/
TypeActivity or Event Identifier:
AdministrativeDate M M / D D / Y Y Y Y

Transaction ID: D7301

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

545.21

2051.03

2596.24

B. Full Name (Last, First, Middle Initial)

Denison Parking, INC.

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

620623.49

Mailing Address

36 S Pennsylvania St Ste 200

City

State

Zip Code

Indianapolis

IN

46204-3627

Purpose of Disbursement:
parkingCategory/
TypeActivity or Event Identifier:
AdministrativeDate M M / D D / Y Y Y Y

Transaction ID: D7282

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

277.20

1042.80

1320.00

C. Full Name (Last, First, Middle Initial)

Anthem BCBS IN GROUP

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

620623.49

Mailing Address

PO Box 105113

City

State

Zip Code

Atlanta

GA

30348-5113

Purpose of Disbursement:
health insuranceCategory/
TypeActivity or Event Identifier:
AdministrativeDate M M / D D / Y Y Y Y

Transaction ID: D7290

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

760.91

2862.45

3623.36

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1583.32

5956.28

7539.60

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 73 / 84

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial)
Anthem Life

Mailing Address

Department L-8111

City	State	Zip Code
Columbus	OH	43268-0001

Purpose of Disbursement:
health insuranceCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

620623.49

Date

M	M
1	0

 /

D	D
0	1

 /

Y	Y	Y	Y
2	0	0	6

Transaction ID: D7291

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

127.23

478.61

605.84

B. Full Name (Last, First, Middle Initial)
Jewett Printing

Mailing Address

101 W Ohio St Ste 2000

City	State	Zip Code
Indianapolis	IN	46204-4204

Purpose of Disbursement:
printingCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

620623.49

Date

M	M
1	0

 /

D	D
0	1

 /

Y	Y	Y	Y
2	0	0	6

Transaction ID: D7293

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

155.86

586.35

742.21

C. Full Name (Last, First, Middle Initial)
Duke Realty Corporation

Mailing Address

75 Remittance Dr Dept 3205

City	State	Zip Code
Chicago	IL	60675-3205

Purpose of Disbursement:
rentCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

620623.49

Date

M	M
1	0

 /

D	D
1	2

 /

Y	Y	Y	Y
2	0	0	6

Transaction ID: D7285

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1673.05

6293.87

7966.92

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1956.14

7358.83

9314.97

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 74 / 84

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial)

Indianapolis Star

Mailing Address

PO Box 145

City

State

Zip Code

Indianapolis

IN

46206-0145

Purpose of Disbursement:
subscriptionCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

620623.49

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	2	/	2	0	0	6

Transaction ID: D7596

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

6.75

25.39

32.14

B. Full Name (Last, First, Middle Initial)

LexisNexis

Mailing Address

PO Box 2314

City

State

Zip Code

Carol Stream

IL

60132-0001

Purpose of Disbursement:
legal pressCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

620623.49

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	2	/	2	0	0	6

Transaction ID: D7602

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

110.25

414.75

525.00

C. Full Name (Last, First, Middle Initial)

Simple Distributors LLC

Mailing Address

2000 W Carroll Ave Ste 403

City

State

Zip Code

Chicago

IL

60612-1677

Purpose of Disbursement:
office suppliesCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

620623.49

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	1	/	2	0	0	6

Transaction ID: D7294

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

34.28

128.96

163.24

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

151.28

569.10

720.38

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 75 / 84

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial)
Dell Financial Services

Mailing Address
PO Box 5292

City State Zip Code
Carol Stream IL 60197-5292

Purpose of Disbursement:
computer
Category/
Type
Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

620623.49

Date

M	M
1	0

 /

D	D
1	2

 /

Y	Y	Y	Y
2	0	0	6

Transaction ID: D7597

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

5.25

19.75

25.00

B. Full Name (Last, First, Middle Initial)
Advance Printing

Mailing Address
2260 Profit Dr

City State Zip Code
Indianapolis IN 46241-5019

Purpose of Disbursement:
envelopes
Category/
Type
Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

620623.49

Date

M	M
1	0

 /

D	D
0	1

 /

Y	Y	Y	Y
2	0	0	6

Transaction ID: D7298

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

159.16

598.74

757.90

C. Full Name (Last, First, Middle Initial)
Advance Printing

Mailing Address
2260 Profit Dr

City State Zip Code
Indianapolis IN 46241-5019

Purpose of Disbursement:
stationary
Category/
Type
Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

620623.49

Date

M	M
1	0

 /

D	D
0	1

 /

Y	Y	Y	Y
2	0	0	6

Transaction ID: D7299

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

83.48

314.02

397.50

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

247.89

932.51

1180.40

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 76 / 84

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial)

Pitney Bowes Purchase Power

Mailing Address

PO Box 856042

City	State	Zip Code
Louisville	KY	40285-6042

Purpose of Disbursement:
postage meterCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

620623.49

Date

M	M
1	0

 /

D	D
0	1

 /

Y	Y	Y	Y
2	0	0	6

Transaction ID: D7277

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

8.40

31.59

39.99

B. Full Name (Last, First, Middle Initial)

The Conference Group

Mailing Address

254 Chapman Rd , Topkis Building S

City	State	Zip Code
Newark	DE	19702

Purpose of Disbursement:
conference callsCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

620623.49

Date

M	M
1	0

 /

D	D
0	1

 /

Y	Y	Y	Y
2	0	0	6

Transaction ID: D7280

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

120.75

454.26

575.01

C. Full Name (Last, First, Middle Initial)

Mrs. Kimberly N Bostic

Mailing Address

6864 W Philadelphia Dr

City	State	Zip Code
Mc Cordsville	IN	46055-9325

Purpose of Disbursement:
payrollCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

620623.49

Date

M	M
1	0

 /

D	D
1	3

 /

Y	Y	Y	Y
2	0	0	6

Transaction ID: D7300

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

277.46

1043.76

1321.22

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

406.61

1529.61

1936.22

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 77 / 84

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial)
 Cingular Wireless

Mailing Address

10617 E Washington St

City

State

Zip Code

Indianapolis

IN

46229-2611

Purpose of Disbursement:
 phones

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

620623.49

Date

M M / D D / Y Y Y Y

1 0 / 1 2 / 2 0 0 6

Transaction ID: D7228

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

445.51

1675.96

2121.47

B. Full Name (Last, First, Middle Initial)
 Gregory & Appel Insurance

Mailing Address

1402 N. Capitol, Suite 400

City

State

Zip Code

Indianapolis

IN

46202

Purpose of Disbursement:
 Liability insurance

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

620623.49

Date

M M / D D / Y Y Y Y

1 0 / 1 2 / 2 0 0 6

Transaction ID: D7599

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

127.26

478.74

606.00

C. Full Name (Last, First, Middle Initial)
 Gregory & Appel Insurance

Mailing Address

1402 N. Capitol, Suite 400

City

State

Zip Code

Indianapolis

IN

46202

Purpose of Disbursement:
 Liability insurance

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

620623.49

Date

M M / D D / Y Y Y Y

1 0 / 1 2 / 2 0 0 6

Transaction ID: D7600

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

556.08

2091.92

2648.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

1128.85

4246.62

5375.47

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 78 / 84

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial)
Anthem-COBRA

Mailing Address
L-2099

City State Zip Code
Columbus OH 43260-0001

Purpose of Disbursement:
health insurance
Category/
Type
Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

620623.49

Date

M	M
1	0

 /

D	D
0	1

 /

Y	Y	Y	Y
2	0	0	6

Transaction ID: D7281

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

10.50

39.50

50.00

B. Full Name (Last, First, Middle Initial)
AT & T

Mailing Address
PO Box 660011

City State Zip Code
Dallas TX 75266-0011

Purpose of Disbursement:
phones
Category/
Type
Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

620623.49

Date

M	M
1	0

 /

D	D
1	2

 /

Y	Y	Y	Y
2	0	0	6

Transaction ID: D7591

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

214.27

806.06

1020.33

C. Full Name (Last, First, Middle Initial)
SBC Internet Services

Mailing Address
PO Box 650396

City State Zip Code
Dallas TX 75265-0396

Purpose of Disbursement:
internet
Category/
Type
Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

620623.49

Date

M	M
1	0

 /

D	D
0	1

 /

Y	Y	Y	Y
2	0	0	6

Transaction ID: D7279

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

254.46

957.24

1211.70

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

479.23

1802.80

2282.03

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 79 / 84

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial)

Denison Parking

Mailing Address

101 W Ohio Street

City State Zip Code

Indianapolis IN 46204

Purpose of Disbursement:
parkingCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

620623.49

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	1	/	2	0	0	6

Transaction ID: D7278

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

184.80

695.20

880.00

B. Full Name (Last, First, Middle Initial)

AT&T Capital Services

Mailing Address

13160 Collection Center Dr

City State Zip Code

Chicago IL 60693-0131

Purpose of Disbursement:
phonesCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

620623.49

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	1	/	2	0	0	6

Transaction ID: D7289

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

113.76

427.95

541.71

C. Full Name (Last, First, Middle Initial)

AT&T Capital Services

Mailing Address

13160 Collection Center Dr

City State Zip Code

Chicago IL 60693-0131

Purpose of Disbursement:
phonesCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

620623.49

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	2	/	2	0	0	6

Transaction ID: D7603

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

113.76

427.95

541.71

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

412.32

1551.10

1963.42

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 80 / 84

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial)
 Kelly N Norton

Mailing Address

5547 N Winthrop Unit B

City

State

Zip Code

Indianapolis

IN

46220-1944

Purpose of Disbursement:
 payroll

Category/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

620623.49

Date / /

Transaction ID: D7304

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

166.49

626.32

792.81

B. Full Name (Last, First, Middle Initial)
 Hulman & Co.

Mailing Address

900 Wabash Ave

City

State

Zip Code

Terre Haute

IN

47807-3208

Purpose of Disbursement:
 rent

Category/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

620623.49

Date / /

Transaction ID: D7305

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

327.92

1233.62

1561.54

C. Full Name (Last, First, Middle Initial)
 Princeton Mining Company

Mailing Address

PO Box 3088

City

State

Zip Code

Terre Haute

IN

47803-0088

Purpose of Disbursement:
 utilities

Category/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

620623.49

Date / /

Transaction ID: D7380

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

125.26

471.23

596.49

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

619.67

2331.17

2950.84

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 81 / 84
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial)
 Caesars Indiana Casino Resort

Mailing Address

11999 Avenue Of The Emperors SE

City	State	Zip Code
Elizabeth	IN	47117-7753

Purpose of Disbursement:
conventionCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

620623.49

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	1	/	2	0	0	6

Transaction ID: D7295

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2096.82		7888.02		9984.84

B. Full Name (Last, First, Middle Initial)
 DHL Express Inc.

Mailing Address

1200 S Pine Island Rd

City	State	Zip Code
Plantation	FL	33324

Purpose of Disbursement:
delivery serviceCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

620623.49

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	1	/	2	0	0	6

Transaction ID: D7283

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
27.13		102.05		129.18

C. Full Name (Last, First, Middle Initial)
 DHL Express Inc.

Mailing Address

1200 S Pine Island Rd

City	State	Zip Code
Plantation	FL	33324

Purpose of Disbursement:
delivery serviceCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

620623.49

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	1	/	2	0	0	6

Transaction ID: D7284

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
33.70		126.79		160.49

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2157.65		8116.86		10274.51

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 82 / 84
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial)

DHL Express Inc.

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

Mailing Address

1200 S Pine Island Rd

City State Zip Code

Plantation FL 33324

Purpose of Disbursement:
delivery serviceCategory/
Type☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

620623.49

Activity or Event Identifier:
AdministrativeDate MM / DD / YYYY
10 / 01 / 2006

Transaction ID: D7292

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

48.45

182.28

230.73

B. Full Name (Last, First, Middle Initial)

DHL Express Inc.

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

Mailing Address

1200 S Pine Island Rd

City State Zip Code

Plantation FL 33324

Purpose of Disbursement:
delivery serviceCategory/
Type☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

620623.49

Activity or Event Identifier:
AdministrativeDate MM / DD / YYYY
10 / 12 / 2006

Transaction ID: D7598

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

38.28

144.02

182.30

C. Full Name (Last, First, Middle Initial)

Malden Express, LLC

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

Mailing Address

2021 E 52nd St Ste 101

City State Zip Code

Indianapolis IN 46205

Purpose of Disbursement:
suppliesCategory/
Type☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

620623.49

Activity or Event Identifier:
AdministrativeDate MM / DD / YYYY
10 / 12 / 2006

Transaction ID: D7605

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

39.69

149.31

189.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

126.42

475.61

602.03

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial)
 PrimePay

Mailing Address

9382 Priority Way West Dr

City	State	Zip Code
Indianapolis	IN	46240

Purpose of Disbursement:
payroll serviceCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

620623.49

Date

M	M
1	0

 /

D	D
0	1

 /

Y	Y	Y	Y
2	0	0	6

Transaction ID: D7296

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

96.63

363.50

460.13

B. Full Name (Last, First, Middle Initial)
 Mark A. Lee

Mailing Address

402 N Meridian St Apt 208

City	State	Zip Code
Indianapolis	IN	46204

Purpose of Disbursement:
travel reimbursementCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

620623.49

Date

M	M
1	0

 /

D	D
0	1

 /

Y	Y	Y	Y
2	0	0	6

Transaction ID: D7297

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

17.28

65.01

82.29

C. Full Name (Last, First, Middle Initial)
 Mark A. Lee

Mailing Address

402 N Meridian St Apt 208

City	State	Zip Code
Indianapolis	IN	46204

Purpose of Disbursement:
payrollCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

620623.49

Date

M	M
1	0

 /

D	D
1	3

 /

Y	Y	Y	Y
2	0	0	6

Transaction ID: D7303

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

211.23

794.65

1005.88

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

325.14

1223.16

1548.30

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

9594.52

36093.65

45688.17

Form/Schedule: **F3XA**

Transaction ID:

Please note that the Committee is amending all reports from January 1, 2005, to present as a result of a comprehensive and expansive internal audit in which several discrepancies and irregularities were discovered. Please note that from January 1, 2005, through mid 2007, the Committee did not correctly report allocable expenses. This issue has been corrected on these amendments and has been reported correctly since its discovery in 2007. This issue is related to ADR 342.
